



Linda McCulloch, Superintendent  
Office of Public Instruction  
PO Box 202501  
Helena, MT 59620-2501

**School District Claim for  
State Reimbursement for  
Individual and Isolated Transportation**

State ☐  
District ☐  
County ☐

<b>DUE DATES:</b>	<b>First Semester</b>	<b>Second Semester</b>
	February 1 to County Superintendent February 15 to State Superintendent	May 10 to County Superintendent May 24 to State Superintendent

**COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION:**

This claim is for the period beginning \_\_\_\_\_, 20\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_.  
month day month day

**CERTIFICATION:**

The information on this form is complete and accurate to the best of my knowledge.

Date			Signature, Chair, Board of Trustees			
County: <b>31 Mineral</b>			District: <b>0577 Alberton K-12 Schools</b>		District Level: <b>High School</b>	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
2	1982	No	Pluth, Patty		1.75	



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Date			Signature, Chair, Board of Trustees			
County:			District:		District Level:	
<b>31 Mineral</b>			<b>0582 St Regis K-12 Schools</b>		<b>High School</b>	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
1	1961	No	Snodgrass, Marie		0.55	_____
1	1962	No	Duncan, Sarah		2.25	_____